DECLARATION AND P ER OF ATTORNEY FOR PATENT APPLICATION

DOCKET NO. 10008401 -1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Consumable Staple Refill									
	the specification of which is attached hereto unless the following box is checked:									
	() was filed on as US Application No. or PCT International Application Number and was amended on (if applicable).									
	I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56.									
	Foreign Application(s) and/or Claim of Foreign Priority I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:									
	COUNTRY	APPLICATION NUMBER		DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119					
					YES:	NO:				
.sam.					YES:	NO:				
QQ	Provisional Application I hereby claim the benefit under Title below:	35, United State	s Code Sect	tion 119(e) of any United	States provisional	application(s) listed				
		APPLICATION NUMBE	R	FILING DATE						
U										
T										
<u></u>	U. S. Priority Claim I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior									
	application and the national or PCT international filing date of this application:									
-	APPLICATION NUMBER	FILING DATE		STATUS (p	patented/pending/abandone	/pending/abandoned)				
	POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:									
	Customer Number	022879		Place Customer Number Bar Code Label here						
	Send Correspondence to: HEWLETT-PACKARD COMPANY			Direct Telephone Calls To:						
	Intellectual Property Administration			Matthew L. Wade						
	P.O. Box 272400 Fort Collins, Colorado 80527-2400			(208) 396-5263						
	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
	Full Name of Inventor: Roberto Obregon			Citizenship: MX						
	Residence: Av. Naciones Unidas 6111-55 Parque La Castellana Zapopan Jalisco 45110 N									
	Post Office Address: Same as I	s: Same as residence								

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DECLARATION AND ER OF ATTORNEY FOR PATENT APPLICATION (continued)



	Full Name of # 2 joint inventor:	Marina M. Talavera		Citizenship: MX			
	Residence:	Araceli Souza #5559-301, Col. Pas	seos del S	Sol Guadalajara, Jalisco 45090	Mexico		
	Post Office Address:	Same as Residence					
	Inventor's Signeture	x 01/0ct/2001 Date					
	Full Name of # 3 joint inventor:			Citizenship:			
	Residence:						
	Post Office Address:						
	Inventor's Signature	D	ate				
	Full Name of # 4 joint inventor.			Cistromobio			
	Residence:			Citizenship:			
	Post Office Address:						
7	rost Office Address.						
-	Inventor's Signature	Ē	ate				
		:		,			
=	Full Name of # 5 joint inventor	:		Citizenship:			
Print man	Residence:						
	Post Office Address:						
	Inventor's Signature		ate				
å.							
	Full Name of # 6 joint inventor	:		Citizenship:			
	Residence:						
	Post Office Address:						
	Inventor's Signature)ate				
	J	•	ate	۸.	•		
	Full Name of # 7 joint inventor	:		Citizenship:			
	Residence:						
	Post Office Address:						
	Inventor's Signature				·-·-		
	3 Signature		Date				
	Full Name of # 8 joint inventor	:		Citizenship:			
	Residence:			·			
	Post Office Address:						
	Inventor's Signature		Date				